

Erin M Thomas Therapy, LLC. (970) 672-5535 (office)

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Disclosure Statement

Welcome! This disclosure statement is intended to describe my qualifications, your rights as a client, and the procedures of therapy. Please read this information carefully and ask any questions that you may have.

My Qualifications

I am a Licensed Professional Counselor and Nationally Certified Counselor. I completed my Bachelor's Degree in Psychology, English Literature and General Business from the University of Arizona and my Master's Degree in Clinical Counseling, with a specialization in Couples and Family Therapy, from the University of Northern Colorado. I have been practicing therapy since 2012. My background and training have given me considerable experience helping individuals and families to heal after difficult experiences. I have specialized training in trauma, abuse, and neglect as well as being trained to provide play therapy, neurofeedback, eye movement desensitization and reprocessing (EMDR), trauma focused cognitive behavioral therapy, psychoeducation, sexual abuse treatment and parenting support. My practice is registered with the State of Colorado where the practice of licensed or registered persons in the field of psychotherapy is regulated by the Mental Health Licensing Section of the Division of Registrations at 1560 Broadway, Suite 1350, Denver, Colorado 80202 or (303) 894-7800.

The regulatory requirements for mental health professionals provide that a Licensed Clinical Social Worker, a Licensed Marriage and Family Therapist, and a Licensed Professional Counselor must hold a masters degree in their profession and have two years of post-masters supervision. A Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctorial supervision. A Licensed Social Worker must hold a masters degree in social work. A Psychologist Candidate, a Marriage and Family Therapist Candidate, and a Licensed Professional Counselor Candidate must hold the necessary licensing degree and be in the process of completing the required supervision for licensure. A Certified Addiction Counselor I (CAC I) must be a high school graduate, and complete required training hours and 1000 hours of supervised experience. A CAC II must complete additional required training hours and 2,000 hours of supervised experience. A Licensed Addiction Counselor must have a clinical masters degree and meet the CAC III requirements. A Registered Psychotherapist is registered with the State Board of Registered Psychotherapists, and is not licensed or certified.

Your Rights as a Therapy Consumer

As a therapy consumer, you have the following rights:

- a) To be treated with dignity and respect.
- b) To receive information concerning the methods of therapy employed, the techniques used, the possible duration of therapy, and the fee structure for services provided.
- c) To receive a second opinion from another therapist, change therapists or terminate at any time without any moral, legal, or financial obligations other than those you have already accrued. I will provide names of at least three other qualified professionals upon request.
- d) To review or receive a summary of your records at any time. If you request it, any part of your records can be released to any person or agency you designate.
- e) To not be discriminated against due to race or ethnicity, sex or gender, age, religion, disability, sexual orientation, or socioeconomic status.
- f) In a professional relationship, sexual intimacy between a therapist and client is never appropriate.
- g) To make a complaint or grievance at any time without retaliation. If you have concerns, you may speak with me directly or contact the regulatory boards at the address listed above.

Confidentiality

All information provided by you during therapy sessions is confidential to persons or agencies outside of therapy. Such information can only be shared with your written permission. However, there are certain situations in which I am legally bound to reveal information obtained during therapy to other persons or agencies without your permission. These situations are:

(a) if I believe or suspect you are in imminent danger to yourself;

(b) if you threaten grave bodily harm or death to another person or directly endanger the life of another I have a legal duty to report you to law enforcement and contact the threatened person(s);

(c) reporting suspected child abuse or neglect to Law Enforcement or the Department of Human Services;

(d) when I am court ordered to release information;

(e) if I need to initiate a mental health evaluation of a client who is imminently dangerous to self or to others, or who is gravely disabled, as a result of a mental disorder;

- (f) if I suspect you know about or pose a threat to national security;
- (g) if I believe that elder abuse or exploitation has probably occurred or is occurring;
- (h) if I suspect abuse or mistreatment of at-risk adults.

In situations (a) and (b) I may initiate an emergency 72-hour hold for psychiatric evaluation. When I am concerned about a client's safety, it is my policy to request a Welfare Check through local law enforcement. In doing so, I may disclose to law enforcement officers information pertaining to my concerns. By signing this Disclosure Statement and agreeing to treatment with me, you consent to this practice, if it should become necessary.

On occasion, clients will request that I testify in court proceedings. If you are involved in a divorce or custody litigation, my role as a therapist is not to make recommendations to the court concerning custody or parenting issues. Please be aware that having me testify in court puts any testimony regarding confidential therapeutic content into the public record. It also produces a risk of the entire therapeutic file being ordered into the public record. If you or your attorney subpoena's me for testimony, you are responsible for assuming these risks.

In working with couples and families, it is my philosophy that honesty between individuals is important, and keeping secrets is typically damaging to relationships. In order to help couples and families address issues, having the option to discuss information openly is vital. I use my clinical judgment in regard to sharing information in couple or family sessions that has been disclosed during individual sessions and I will not disclose in situations where your safety may be at risk.

The highest standard of practice for mental health professionals is to receive consultation from their colleagues in order to provide the best quality of services. I participate in regular supervision and consultation groups with the therapists at ChildSafe and other local therapists. In these groups, we do not use any identifying information, and the therapists are bound by confidentiality and cannot disclose your information to anyone. If you are interested, I will provide you with a list of names of the therapists who participate in the groups. I also receive individual, direct peer consultation on a regular basis with Laura Molzer, Valerie Macri-Lind, and the EEG Institute. If either of these therapists may know you on a personal level, please let me know and I will not discuss your case with them.

Some clients find it helpful to communicate with me through the use of e-mail or texting. These communications are reserved for the purpose of scheduling and sharing basic information. It is considered unethical to conduct therapy via electronic means. Please be aware that e-mail and texting are not considered secure means of communication. I have included a confidentiality notice that goes out with all of my e-mails, but I cannot guarantee that your information will remain confidential. By signing this disclosure, you assume the risks of e-mailing or texting me should you choose to do so.

I am in the office Monday and Friday. I see clients and check my phone messages on those days. I am not available on weekends and do not provide on-call emergency services. If there is an emergency you may call 911 or go to the emergency room. You may also contact the local suicide hotline at 221-2114 during business hours or 221-5551 after hours. When I am on vacation and at professional trainings my voicemail will have the contact information for another therapist who is available should you need to speak to a therapist.

Agreement: I have read, been provided verbally and received a copy of this Disclosure Statement. I understand my rights as a client and agree to the above stated policies, procedures, and requirements.

Client Name (please print)	Client Signature (if necessary)	Date
Parent/Guardian Name	Parent/Guardian Signature	Date
Erin M. Thomas, MA, LPC Therapist Name	Therapist Signature	Date